



PTO/SB/22 (12-04)

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## PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

FY 2005

(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)

Docket Number (Optional)

29618/EL013

Application Number

10/626,080-Conf. #9963

Filed

July 24, 2003

For Desktop Filing System

Art Unit 3634

Examiner

Colleen M. Quinn

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

|  | Fee    | Small Entity Fee |           |
|--|--------|------------------|-----------|
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1))             | \$120  | \$60             | \$        |
| <input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$450  | \$225            | \$ 450.00 |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3))          | \$1020 | \$510            | \$        |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))           | \$1590 | \$795            | \$        |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))           | \$2160 | \$1080           | \$        |

☐ Applicant claims small entity status. See 37 CFR 1.27.☐ A check in the amount of the fee is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☐ The Director has already been authorized to charge fees in this application to a Deposit Account.☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 13-2855. I have enclosed a duplicate copy of this sheet.

I am the

☐

applicant/inventor.

☐

assignee of record of the entire interest. See 37 CFR 3.71.

☐

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☐

attorney or agent of record. Registration Number \_\_\_\_\_

☒

attorney or agent under 37 CFR 1.34.

Registration number if acting under 37 CFR 1.34

55,064

Signature

August 22, 2007

Date

Michael A. Chinlund

(312) 474-6300

Typed or printed name

Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒Total of 1 forms are submitted.

08/29/2007 HUJONG1 00000015 132855 10626080

02 FC:1252 450.00 DA

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: MS RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: August 22, 2007

Signature:

(Michael A. Chinlund)

08/28/2007 HUJONG1 00000044 10626080

02 FC:1251

450.00 DA